



NSA Guest Camper Application Form

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| NSA Guest Camper Application Form | | | |
| Name | Age | Gender | Birth date (DD/MM/YY) |
| Address | | | |
| Athlete Cell Number | | Athlete Email | |
| City | Province | Postal Code | |
| Telephone (residence) | | Parent Email Address | |
| Health Card # | | | |
| Father's Name | | | Cell |
| Mother's Name | | | Cell |

A deposit of \$1,000 is due with your application, see camp information for other payment details. Payment by cheque, Visa or MasterCard. Please contact Carol Tolles 705.444.1617 ctolles@nsa.on.ca to arrange payment.